

FORM
5A

Rev
02/08

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
----	----	----	----

Document Number:

400143648

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 100322 4. Contact Name: Justin Garrett
2. Name of Operator: NOBLE ENERGY INC Phone: (303) 228-4449
3. Address: 1625 BROADWAY STE 2200 Fax: (303) 228-4286
City: DENVER State: CO Zip: 80202

5. API Number 05-123-32161-00 6. County: WELD
7. Well Name: Hoff PC Well Number: D06-28D
8. Location: QtrQtr: NWNW Section: 6 Township: 3N Range: 64W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIORARA-CODELL Status: PRODUCING

Treatment Date: 12/06/2010 Date of First Production this formation: 12/11/2010
Perforations Top: 6980 Bottom: 7256 No. Holes: 128 Hole size:

Provide a brief summary of the formation treatment: Open Hole: ☐

Codell and Niobrara are commingled; Codell and Niobrara are each producing through composite flow through plugs.
Codell 7242-7256, 56 holes, .41"
Frac'd Codell w/141795 gals Silverstim, Acid, and Slick Water with 270140 lbs Ottawa sand
Niobrara 6980-7126, 72 holes, .73"
Frac'd Niobrara w/271829 gals Silverstim, Acid, and Slick Water with 400560 lbs Ottawa sand

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 12/15/2010 Hours: 24 Bbls oil: 72 Mcf Gas: 611 Bbls H2O: 116
Calculated 24 hour rate: Bbls oil: 72 Mcf Gas: 611 Bbls H2O: 116 GOR: 8486
Test Method: Flowing Casing PSI: 1325 Tubing PSI: 0 Choke Size: 12/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1268 API Gravity Oil: 58
Tubing Size: Tubing Setting Depth: Tbg setting date: Packer Depth:

Reason for Non-Production:

Date formation Abandoned: Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt

Bridge Plug Depth: Sacks cement on top:

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Justin Garrett

Title: Regulatory Specialist

Date: 3/23/2011

Email: JDGarrett@nobleenergyinc.com

:

Attachment Check List

Att Doc Num	Name
400143648	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)